PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number 10/0731007 4955 - 4301

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE 0			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			30					RATE	FEE)	RATE	FEE
FOR			NUMBER FILED		NUME	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			3 <i>O</i> minus 20=		. 10			X\$ 9=	90	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		*	0		X42=	8	OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESE								+140=	A.	OR	+280=	
* If the difference in column 1 is less than zero, e					"0" in (olumn 2	ı	TOTAL	460	OR	TOTAL	
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
		(Column 1) CLAIMS	(Colum			(Column 3)	<u> </u>	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 36	Minus	** 3	30	= 6		X\$ 9=	54.	OR	X\$18=	
AM	Independent #			3 CLAIM	-	11	X42=		OR	X84=		
								+140=		OR	+280=	
								TOTAL ADDIT, FEE	54	OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												ų.
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞH NUMI PREVIC PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**				X\$ 9=		OR	X\$18≈	
	Independent	*	Minus	***		-	1-1	X42=		OR	X84=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEF	ENDENT	CLAIM		┚╏	+140=		OR	+280=	
TOTAL ADDIT FEE										OR	TOTAL ADDIT, FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		-	11	X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							145		t		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
**	the "Highest Nur	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is	less than	20, nter "20."	. AI	TOTAL DDIT. FEE		OR ,	TOTAL ODIT. FEE	
		ber Previously Paid					er foun	id in the appi	opriat box	in colu	umn 1.	